



DEPARTMENT OF SERVICES FOR CHILDREN, YOUTH AND THEIR FAMILIES  
OFFICE OF CHILD CARE LICENSING  
KENT COUNTY (302)739-5487 OR (800)822-2236 TIME: 6:15 P.M. TO 7:15 P.M.



ADMINISTRATION OF MEDICATION CERTIFICATION TEST

State law requires that only individuals who have successfully completed state approved test may administer medication in childcare. To administer medication to children in a state licensed facility, **you must study the Administration of Medication Self-Study Program packet and pass a written test with a grade of 80% at least on the contents.**

The testing session will be conducted and monitored by a Registered Nurse. She will be available from 6:15 p.m. to 6:30 p.m. on the testing night to answer any questions you or your staff may have about the content of the self-study packet. **ADMITTANCE TO THE TESTING SESSION WILL BE CLOSED AT 6:30 P.M. WHEN THE TEST BEGINS.** The session will finish at 7:15 P.M. **YOU MAY DOWNLOAD THE ADMINISTRATION OF MEDICATION STUDY PACKET FROM OUR WEBSITE: [http://kids.delaware.gov/pdfs/occl\\_administration\\_of\\_meds\\_2005.pdf](http://kids.delaware.gov/pdfs/occl_administration_of_meds_2005.pdf)**

There is a **NON-REFUNDABLE** fee of **\$6.00 PER PERSON PAYABLE BY MONEY ORDER with this Registration Form** for the testing session. For child care centers, please list the names of staff to attend on a separate page. Only those individuals who have registered and pre-paid will be permitted to attend. Please select an alternate date for which you could attend. **YOU WILL ONLY BE NOTIFIED IF YOUR FIRST CHOICE IS NOT AVAILABLE, OR IF THE SESSION MUST BE CANCELED. IF YOU FAIL TO ATTEND THE SESSION OR IF YOU REQUEST TO BE RESCHEDULED, YOU WILL NEED TO COMPLETE A NEW REGISTRATION FORM AND MAIL WITH ANOTHER \$6.00 MONEY ORDER.**

PLEASE CONTACT THIS OFFICE, IN ADVANCE, IF SPECIAL ARRANGEMENTS ARE NEEDED TO COMPLETE THIS TEST. SPECIAL ARRANGEMENTS WILL NOT BE ACCEPTED THE DAY OF THE TESTING. **PHOTO ID IS REQUIRED TO ATTEND THE SESSION.**

KENT COUNTY TESTING LOCATION →

OFFICE OF CHILD CARE LICENSING  
821 SILVER LAKE BOULEVARD, SUITE 103  
DOVER, DELAWARE 19904

Wednesday, January 29, 2014	Wednesday, February 26, 2014	Wednesday, March 26, 2014
Wednesday, April 23, 2014	Wednesday, May 21, 2014	Wednesday, July 23, 2014
Wednesday, August 27, 2014	Wednesday, September 24, 2014	Wednesday, October 22, 2014
Wednesday, November 19, 2014		

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REGISTRATION SLIP FOR KENT COUNTY [PLEASE PRINT LEGIBLY]

NAME:	(PRINT LEGIBLY)	DOB:	
STREET ADDRESS:		CITY/STATE/ZIP:	
IF YOU WORK FOR A CENTER – NAME OF CENTER:		CENTER PHONE #:	
TESTING DATE: 1 <sup>ST</sup> CHOICE →		2 <sup>ND</sup> CHOICE →	

MAKE MONEY ORDERS PAYABLE TO: STATE OF DELAWARE/DFS

➤ NO CHECKS ~ NO CASH ~ ***MONEY ORDER ONLY*** ◀

Detach and mail registration to:

OFFICE OF CHILD CARE LICENSING  
821 SILVER LAKE BOULEVARD, SUITE 103  
DOVER, DELAWARE 19904



**\$6.00 PER PERSON**